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Fani Malikouzakis (Depositor's Name)
 Fani Malikouzakis (Signature)
 November 12, 2008 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/687,727	10/16/2003	Noriyuki Nishi	KIT-360	4623

TITLE OF INVENTION: CONVERSION CORRECTING METHOD OF COLOR IMAGE DATA AND PHOTOGRAPHIC PROCESSING APPARATUS IMPLEMENTING THE METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	11/13/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS				
WOLDEMARIAM, AKILILU K	2624	382-167000	01 FC:1504 02 FC:8001		388.00 OP 9.00 OP 1440.00 OP	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list:
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Fulbright & Jaworski L**

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: **NORITSU KOKI CO., LTD.**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
Wakayama-Ken, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies **3**

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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **500624** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date **November 12, 2008**

Typed or printed name

C. Andrew Im

Registration No. **40,657**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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KIT 360 US (10312937)

IN THE UNITED STATES PATENT AND TRADEMARKS OFFICE

Applicant(s): Noriyuki NISHI et al.
Serial Number: 10/687,727
Filed: October 16, 2003
For: CONVERSION CORRECTING METHOD OF COLOR
IMAGE DATA AND PHOTOGRAPHIC PROCESSING
APPARATUS IMPLEMENTING THE METHOD
Art Unit: 2624 Examiner: A. K. WOLDEMARIAM
Class-Subclass: 382-167000 Confirmation No. 4623

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Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sirs:

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<input checked="" type="checkbox"/> Issue Fee and Form PTOL-85b	\$1440.00 (Large)
<input checked="" type="checkbox"/> Publication Fee	\$ 300.00
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Respectfully yours,

C. Andrew Im
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